

only—and they are often worth no more than the paper on which they are printed. When the issues are sickness and health—and often as serious as life and death—no health insurance company should be allowed to be both judge and jury.

In addition, when the misconduct of managed care plans actually results in serious injury or death, patients and their families should be able to hold the plans liable in court. Every other industry in America can be held responsible for its actions. Why should health plans, whose decisions truly can mean life or death, enjoy this unique and unfair immunity?

Under current law—the Employee Retirement and Income Security Act—patients whose lives have been devastated or destroyed by the reckless behavior of their health plan have no right to go to court to obtain an appropriate remedy under state law. ERISA “preempts” all state remedies. Patients are limited to the narrow federal remedy under ERISA, which covers only the cost of the procedure that the plan failed to pay for. You can be crippled for life by cancer because your plan refused to authorize a test costing a few hundred dollars to detect the cancer in its early stages—and all you can get back to help support your family is the cost of the test you failed to get.

During the debate on the tobacco legislation, Republicans and Democrats alike voted overwhelmingly to support the principle that no industry in America should be exempt from accountability for its actions. Because of ERISA preemption, one industry alone—the health insurance industry—enjoys this protection today. That is wrong—and the Senate should say it's wrong.

During the debate on welfare reform, many on the other side of the aisle spoke strongly in favor of the need for individuals to take responsibility for their actions. It is ironic that some of those who spoke most strongly for responsibility for poor single mothers are opposed to responsibility for a powerful industry that earns tens of billions of dollars in profits every year.

What most Americans do not know—and what the opponents of change ignore—is that ERISA pre-emption does not apply to state and local employee health plans. Employees of the city government or state government, whose health benefits are provided by taxpayers, can hold their health plan accountable in court if it kills or injures them. But equally hardworking families down the street are defenseless—because they happen to work for private industry.

Our legislation is truly a Patients' Bill of Rights that will provide these protections and more. It is a moderate, responsible, and effective response to the widespread problems patients and their families face every day. That is why it is supported by a broad and diverse coalition of doctors, nurses, patients, and advocates for children,

women, and working families. That is why it enjoys bi-partisan support from members of Congress on both sides of the aisle, including a courageous physician, Dr. GREG GANSKE, a Republican Congressman from Iowa, who has seen the abuses of managed care first-hand.

The Republican leadership plan, by contrast, is not supported by any group of doctors or nurses or patients. It has no bi-partisan support. It is an industry profit protection program, not a patient protection program. It is not a Patients' Bill of Rights. It is a Patients' Bill of Wrongs. That is why we need a full debate—so that it can be amended and improved until it provides the protections patients need.

If the Majority Leader will stop abusing the rules of the Senate and allow this debate to proceed, I believe that the Senate will pass strong reforms that will be signed into law by the President. The American people deserve real reform, and I believe that when the Senate votes in the clear light of day, it will give the American people the reforms they deserve. This issue is a test of the Senate's willingness to put a higher priority on the needs of families than on the profits of special interests. And it is time for the Senate to act.

The choice is clear. The Senate should stand with patients, families, and physicians, not with the well-heeled special interests that put profits ahead of patients.

The American people know what's going on. Movie audiences across the country erupt in cheers when actress Helen Hunt attacks the abuses of managed care in the film “As Good As It Gets.” Helen Hunt won an Oscar for that performance, but managed care isn't winning any Oscars from the American people. Everyone knows that managed care today is not “as good as it gets.”

Too often, managed care is mismanaged care. No amount of distortions or smokescreens by insurance companies can change the facts. The Patients' Bill of Rights can stop these abuses. Let's pass it now, before more patients have to suffer.

I thank the Chair. I thank the Senator.

U.S. FOREIGN OIL CONSUMPTION FOR WEEK ENDING SEPTEMBER 25

Mr. HELMS. Mr. President, the American Petroleum Institute reports, for the week ending September 25, that the U.S. imported 9,953,000 barrels of oil each day, 1,691,000 barrels a day more than the 8,262,000 imported during the same week a year ago.

Americans relied on foreign oil for 54.6 percent of their needs last week. There are no signs that the upward spiral will abate. Before the Persian Gulf War, the United States imported about 45 percent of its oil supply from foreign countries. During the Arab oil embargo in the 1970s, foreign oil accounted for only 35 percent of America's oil supply.

All Americans should ponder the economic calamity certain to occur in the U.S. if and when foreign producers shut off our supply—or double the already enormous cost of imported oil flowing into the U.S.: now 9,953,000 barrels a day at a cost of approximately \$132,175,840 a day.

THE VERY BAD DEBT BOXSCORE

Mr. HELMS. Mr. President, at the close of business yesterday, Wednesday, September 30, 1998, the federal debt stood at \$5,526,193,008,897.62 (Five trillion, five hundred twenty-six billion, one hundred ninety-three million, eight thousand, eight hundred ninety-seven dollars and sixty-two cents).

One year ago, September 30, 1997, the federal debt stood at \$5,413,146,000,000 (Five trillion, four hundred thirteen billion, one hundred forty-six million).

Five years ago, September 30, 1993, the federal debt stood at \$4,411,488,000,000 (Four trillion, four hundred eleven billion, four hundred eighty-eight million).

Ten years ago, September 30, 1988, the federal debt stood at \$2,602,338,000,000 (Two trillion, six hundred two billion, three hundred thirty-eight million).

Fifteen years ago, September 30, 1983, the federal debt stood at \$1,377,210,000,000 (One trillion, three hundred seventy-seven billion, two hundred ten million) which reflects a debt increase of more than \$4 trillion—\$4,148,983,008,897.62 (Four trillion, one hundred forty-eight billion, nine hundred eighty-three million, eight thousand, eight hundred ninety-seven dollars and sixty-two cents) during the past 15 years.

MAJOR GENERAL WILLIAM F. MOORE, USAF

Mr. LEVIN. Mr. President, I wanted to take the opportunity to bring to the attention of the Senate the outstanding and continuing service of a fine Air Force officer, General William F. Moore, USAF.

For almost three years, General Moore has served as Director of Special Programs in the Office of the Secretary of Defense. In this capacity, he was responsible for coordinating planning, budgeting, and management of very sensitive Department of Defense special access classified programs.

In fulfilling these duties, General Moore has had frequent contact with the leadership and members of the defense oversight committees in Congress. I believe that General Moore has executed these duties in an exemplary manner. General Moore always operated in a very forthcoming manner, was sensitive to the needs of Congressional oversight committee members, and made great strides in improving the Congressional understanding and coordination of special access programs. I would point out that our former colleague, Secretary of Defense